

UNDERSTANDING AND RESPONDING TO VIOLENCE IN THE WORKPLACE

Department of Health and Human Services

ABRIDGED GUIDELINES
March 1997

VIOLENCE IN THE WORKPLACE

IMPORTANT PHONE NUMBERS/LOCAL RESOURCES (COMPLETE THIS AT LOCAL LEVEL)

Your Supervisor:

Building Security:

Building Health Unit:

Human Resources Staff:

Employee Assistance Program:

Crisis Management Team:

Local Law Enforcement:

Fire Department:

Others:

National Domestic Hotline: 800-799-SAFE or
800-787-3224 (TDD)

INTRODUCTION

PURPOSE OF THIS HANDBOOK

The purpose of this handbook is to provide guidance to all employees of the Department of Health and Human Services (HHS) on managing violent or potentially violent situations. It is intended to make employees aware of the potential for violence in the workplace, to increase their ability to recognize early warning signs of potentially violent situations, and to understand how to respond to actual or potential incidents. For those who want to learn more, it is recommended that the lengthier version of this guideline be read. It can be obtained from your personnel office or the HHS home page on the Internet (www.dhhs.os.gov).

BACKGROUND AND DEFINITION

Violence is a complex phenomenon that appears to be increasing in the workplace. An average of 20 workers are murdered each week in the United States. The majority of these murders are robbery-related crimes. In addition, an estimated 1 million workers are assaulted annually in U.S. workplaces. Most of these assaults occur in service settings such as hospitals, nursing homes, and social service agencies. Factors that place workers at risk for violence in the workplace include interacting with the public, exchanging money, delivering goods or services, working late at night or during early morning hours, working alone, guarding valuables or property, and dealing with violent people or volatile situations. (from Violence in the Workplace: Risk Factors and Prevention Strategies; National Institute for Occupational Safety and Health; June 1996; p. ix)

In HHS, workplace violence is defined in a broad and inclusive manner. It is an action (verbal, written or physical aggression) which is intended to control or cause, or is capable of causing, death or serious bodily injury to oneself or others, or damage to property.

Perpetrators include customers and clients of HHS programs, employees and managers, and persons who have no relationship to the Department. Violence can also occur as a result of domestic situations that spill over into the worksite.

ROLES AND RESPONSIBILITIES

Preventing and responding to actual or potential incidents of workplace violence is the responsibility of everyone at HHS, no matter what level or role.

All employees (including managers and supervisors) are responsible for:

- ▶ their
- ▶ own behavior and interacting responsibly with fellow employees and their supervisors;
- ▶ promptly reporting, anonymously if necessary, any acts of violence, threats, and similar disruptive behavior in the workplace to appropriate authorities;
- ▶ cooperating fully in investigations/assessments of allegations of workplace violence;
- ▶ seeking appropriate assistance (e.g., Employee Assistance Program or other counseling) if they are experiencing stressful personal or work circumstances, generating from any source, which may adversely affect their productivity or lead to unacceptable behavior; and
- ▶ and other protective court orders related to domestic situations so that assistance can be offered at the worksite.

Managers and supervisors are additionally responsible for:

- ▶ ensuring that all employees are fully informed of and understand HHS workplace violence policy and procedures;
- ▶ being cognizant of situations that have the potential to produce violence and promptly addressing them with all concerned parties;
- ▶ being sensitive to stress generated by the workplace and considering changes that could alleviate work-related stress;
- ▶ encouraging employees who show signs of stress or evidence of possible domestic violence to receive assistance, such as that provided by the Employee Assistance Program; and
- ▶ documenting and responding to allegations of workplace violence in a timely fashion, evaluating the results and taking necessary action or assisting the Crisis Management Team.

Additionally, other components of the Department have special responsibilities in preventing and responding to workplace violence. The Servicing Personnel Office, the security office, the Employee Assistance Program, the training office, the unions, and the safety officers may assist in investigating and intervening in

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these situations; provide technical assistance and support; and provide help for employees showing signs of stress as well as for worksites experiencing conflict and organizational change.

LEARN THE WARNING SIGNS

INTRODUCTION

While they are often preventable, it is still difficult to determine whether or not any particular workplace situation is potentially violent. This is an emotional and complex topic, and decisions about what to do in certain situations are not always straightforward or made in a clearheaded state of mind. In many cases, employees ignore warning signs because they believe they are not important, “that’s just the way Joe is”, or that it is none of their business. In other situations, employees react based on fear and what they believe is the profile of a potentially violent person, not necessarily observed actual behavior. Another major hindrance is not knowing where to go to get help in making determinations regarding real and potential risks.

Actual threats should always be taken seriously and responded to immediately. When there is not an actual threat, judgement and senses should be trusted. “The gut feeling that one gets when talking to people should be respected. If one feels that someone is dangerous, that person should be considered dangerous.” (from Violence in the Workplace, S. Anthony Baron, 1993, p.29)

FORMS OF VIOLENCE

There are many forms of workplace violence. The one form that frequently receives the most attention is workplace homicide. While violence is a substantial contributor to death on the job, it also takes many forms that are non-fatal. Some examples of non-fatal forms of violence are:

- ▶ verbal abuse including offensive, profane and vulgar language;
- ▶ threats (direct or indirect), whether made at work or at home, in person or through letters, phone calls, or electronic mail;
- ▶ physical assault upon oneself or another person;
- ▶ throwing or striking objects;
- ▶ intimidating or frightening others;
- ▶ harassing, stalking, or showing undue focus on another person;
- ▶ concealing or using a weapon;

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- ▶ bomb threats;
- ▶ actions which damage, destroy, or sabotage property; and
- ▶ physically aggressive acts, such as shaking fists at another person, kicking, pounding on desks, punching a wall, angrily jumping up and down, screaming at others.

Because of the nature of the services provided by HHS programs, these types of non-fatal incidents may be perpetrated by our clients or patients, particularly in health settings. They may also be committed by co-workers.

It is important to recognize that violent incidents in the workplace may include acts of domestic violence. Often, co-workers and supervisors believe that domestic violence is something that is not their concern, but a private family matter that should not be brought to work. But the problem is pervasive in the workplace. In a recent study, domestic violence accounted for 27% of violent events in the workplace. (from Workplace Violence Prevention Reporter; October 1996) If the victim has sought shelter, the workplace is sometimes the place she can be found. Occasionally, therefore, the perpetrator will show up at the partner’s worksite to carry out acts of violence against her or anyone trying to protect her.

LEVELS OF VIOLENCE

Potentially or actual violent situations typically escalate if not defused. Dr. S. Anthony Baron, author of Violence in the Workplace (1993), identifies three levels of violence and the warning signs that typically occur at each of the levels. These levels may be seen in clients and patients of HHS programs, among co-workers, and others who have no connection to this Department. They are:

Level One (Early Warning Signs)

The person:

- ▶ refuses to cooperate with those in authority;
- ▶ spreads rumors and gossip to harm others;
- ▶ consistently argues with employees/clients/patients;
- ▶ belligerent toward employees/clients/patients;
- ▶ constantly swears at others; and/or
- ▶ makes unwanted sexual comments.

Level Two (Escalation of the Situation)

The person:

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- ▶ argues increasingly with customers, vendors, employees, and management;
- ▶ refuses to obey agency policies and procedures;
- ▶ sabotages equipment and steals property for revenge;
- ▶ verbalizes wishes to hurt employees and/or management;
- ▶ sends sexual or violent notes to employees and/or management; and/or
- ▶ sees self as victimized by the Department (me against them).

Level Three (Further Escalation, Usually Resulting in an Emergency Response)

The person frequently displays intense anger resulting in:

- ▶ recurrent suicidal threats;
- ▶ recurrent physical fights;
- ▶ destruction of property;
- ▶ utilization of weapons to harm others; and/or
- ▶ commission of murder, rape, and/or arson.

A Note About Domestic Violence

Except when those involved in domestic violence are co-workers, most incidents are perpetrated by individuals outside the agency. It is unlikely, therefore, that the levels of violence described above will be evident. There will, however, be early warning signs that this type of violence is escalating outside the workplace. The victim may show symptoms such as increased fear, emotional episodes, signs of physical injury, and other evidence of physical stress such as excessive phone calls. Victims, as well as perpetrators, also show signs of work performance deterioration as described in the next section. By intervening when the early warning signs occur, even though the violence may not yet have been committed at work, it may prevent a serious incident from occurring.

PERFORMANCE INDICATORS

In addition to the indicators described above, there are also a number of additional performance problems that may be warning signs of potential trouble. Research into incidents of workplace violence discloses without exception the presence of at least several of the characteristics described below. These signs may show up in perpetrators of violence, those who are victims, those who fear violence because they are being threatened, and those involved in domestic violence. Although it is possible that only one of these indicators will occur, it is more likely that a pattern will occur or that they will represent a change from normal behavior. Remember that the presence of any of these characteristics

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does not necessarily mean a violent act will occur. They may be indicators of another type of problem. Examples of performance indicators are listed below.

- ▶ attendance problems
- ▶ impact on supervisor's/manager's time
- ▶ decreased productivity
- ▶ inconsistent work patterns
- ▶ inappropriate reactions
- ▶ concentration problems
- ▶ safety issues
- ▶ poor health and hygiene
- ▶ unusual/changed behavior
- ▶ evidence of possible drug or alcohol use/abuse
- ▶ evidence of serious stress in the employee's personal life
- ▶ continual excuses/blame
- ▶ unshakable depression

THREAT ASSESSMENT

Determining the seriousness of a violent or stressful situation and how to best intervene is the basis of a threat assessment which is best handled by a local Crisis Management Team. The team is a group of specialists convened to investigate and assess a violent or potentially violent situation. Depending on the situation, the team may intervene to diffuse threatening occurrences or to implement an action plan.

If help is needed in assessing whether a situation (such as those described in levels 1 and 2 above) is potentially violent contact the designated Crisis Management Team leader found at the front of this handbook OR any member of the team, if the leader is not available. The call should be made immediately. If the situation has escalated as described in level 3 (above), contact emergency numbers (such as 911) before contacting the Crisis Management Team. Do not wait if there is imminent danger.

If no Crisis Management Team has been established in your location, contact a supervisor or one of the programs listed in this section for assistance in making a threat assessment. Again, contact appropriate law enforcement personnel if there is imminent danger.

WHAT TO DO IN A VIOLENT SITUATION

INTRODUCTION

Workplace violence, and threatening and similar disruptive actions, are prohibited because they adversely affect safety, morale and productivity. Ignoring an employee or customer who exhibits these behaviors sends the message that such behaviors are acceptable. Consequently, the behaviors are likely to continue and may even increase in frequency and severity. It is therefore critical to identify and report the behaviors described above at the earliest possible moment so that appropriate action can be taken. When the violent or potentially violent person is an employee, it is also important to note that if it becomes necessary to take disciplinary action later based on the threat or act, the fact that the Department took the behavior seriously will strengthen the basis for the disciplinary action.

To help prevent serious incidents in the workplace, **early intervention into potentially violent situations is recommended**. Employees are urged to make use of the resources available to help in managing conflict and stress that may lead to violence. Available resources include but are not limited to supervisors, Employee Assistance Program counselors, union representatives/stewards, human resources and employee/labor relations specialists, building security personnel, and EEO specialists or counselors. Employees are also urged to stay alert to and act quickly when there are threats from customers or patients of HHS programs.

If, however, early intervention is not effective, this section describes procedures for handling threatening, intimidating, violent, or similar disruptive behaviors when they escalate. This section will also describe some procedures for handling bomb threats and ideas for helping those affected by domestic violence.

WHEN EARLY WARNING SIGNS OCCUR (LEVEL 1)

- ▶ **OBSERVE AND DOCUMENT** (in detail) the behavior in question right after it happens.
- ▶ **REPORT** concerns to supervisor and other appropriate officials. If the offending person is an employee and is the reporting employee's immediate supervisor, the employee should notify the next level of supervision. If the offending person is not an employee, the supervisor

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- of the employee reporting the incident is still the appropriate individual to receive and provide initial response to the report.
- ▶ **CONTACT** HHS' local Crisis Management Team to alert members to any concerns and seek their help in assessing the situation (if you feel it is necessary, submit information anonymously).
 - ▶ If the offending person is an employee, the supervisor should **MEET** with him or her to discuss concerns. Follow the procedures below. (Note that many of these steps may also be useful for dealing with clients/patients of HHS programs.)
 - Schedule private time and place.
 - Get straight to the point.
 - Ask the employee for his or her input.
 - Ask the employee what should be done about the behavior.
 - Ask how you can help.
 - Identify the performance and/or conduct problems that are of concern.
 - Identify the steps you would like to see to correct problems.
 - Set limits on what is acceptable behavior and performance.
 - Establish time frames to make changes and subsequent consequences for not meeting the deadlines.
 - Reward/recognize the desired performance or conduct.
 - Frequently at this level it is only necessary to remind the individual of the Department's policies.

WHEN THE SITUATION HAS ESCALATED (LEVEL 2)

- ▶ **DOCUMENT** (in detail) the behavior in question immediately.
- ▶ Immediately **CONTACT** the supervisor, the local Crisis Management Team, and appropriate law enforcement/security officials in your area.
- ▶ If necessary, **SECURE** your own safety and the safety of others, including contacting people who are in danger (make sure emergency numbers for employees are kept up-to-date and accessible).
- ▶ When appropriate, **CONTACT** others who can assist you such as employee relations, union, and the Employee Assistance Program.
- ▶ If you encounter an angry employee or customer:
 - Call for assistance, if possible.
 - Set ground rules/boundaries.
 - Get others away from the person.
 - Avoid an audience.
 - Remain calm, speaking slowly, softly and clearly.

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- Ask the person to sit down; see if he or she is able to follow directions.
- Ask questions relevant to the person's complaint such as:
 - "What can you do to try to regain control of yourself?";
 - "What can I do to help you regain control?";
 - "What do you hope to gain by committing violence?";
 - "Why do you believe you need to be violent to achieve that?"
- If the person does not calm down, try matching the loudness of his or her voice and gradually bring your voice down to a calm level
- Try to direct the aggressive tendencies into another kind of behavior so that the person sees he or she has choices about how to behave.
- ▶ If the offending person is an employee, the supervisor should again **MEET** with him or her to discuss concerns and begin or continue progressive discipline (if appropriate).

IN AN EMERGENCY (LEVEL 3)

Any individual observing violent or threatening behavior which poses an immediate danger to persons or property is expected to:

- ▶ **REMAIN CALM.**
- ▶ First **SECURE** the safety of him/herself.
- ▶ **CALL** 911 and other appropriate emergency contacts (such as building security and the Federal Protective Service) for that particular facility, especially if the situation requires immediate aid of medical and/or law enforcement personnel.
- ▶ **COOPERATE** with law enforcement personnel when they have responded to the situation. Once law enforcement personnel are on the scene, they will assume control of the situation. Witnesses be prepared to provide a description of the violent or threatening individual, details of what was observed, and the exact location of the incident.
- ▶ **CONTACT** members of the Crisis Management Team so they can convene as quickly as possible.
- ▶ If you are personally confronted by an angry or threatening person, follow the procedures noted in the previous section (Level 2).

HANDLING BOMB THREATS

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The U. S. Department of Justice has prepared the following information on handling bomb threats. It is an unnerving experience for anyone to receive a telephone threat. But there are ways to minimize personal threat and still concentrate on gathering information that may help law enforcement personnel identify the person making the threat. Below is a set of questions to help focus on noticing important information and asking the right questions if a bomb threat is received over the phone. Try to write down exactly what the caller says and then call law enforcement personnel immediately. Obtain the following information.

- ▶ telephone number where the call was received
- ▶ exact time of call
- ▶ exact words of caller
- ▶ answers to these questions:
 - When will the bomb explode?
 - Where is the bomb?
 - What does it look like?
 - What kind of bomb is it?
 - What is your name?
 - What is your address?
 - Where are you calling from?
 - Why did you place the bomb?
- ▶ Make special note of the following information.
 - caller's voice (calm, excited, disguised, accent, etc.)
 - caller's sex
 - caller's age (as determined by voice)
 - voice familiar to you?
 - background noise
 - names of those threatened

DOMESTIC VIOLENCE

In the event that the perpetrator shows up at work (or is a co-worker of the partner) with the intent of harming the partner and any others who happen to be in the way or involved, follow the procedures described above in responding to the immediate crisis.

If you know someone at work who is being affected by domestic violence, whether or not the perpetrator has shown up at work, it is important to provide

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support and assistance. Not only is the person at risk for more and usually escalated violence, but it has a negative impact on the productivity of the entire workplace. Below are some ideas for helping the co-worker affected by domestic violence.

- ▶ Talk to the person about your concerns. Let her know that you are afraid for her safety and the safety of her children. Remind her that it will only get worse. Let her know that you will assist her in locating resources and developing a safety plan.
- ▶ Contact the Employee Assistance Program for more information.
- ▶ Recommend that she call the National Domestic Violence Hotline for more information about domestic violence or to help her find local resources. The number is 800-799-SAFE (7233) or for the hearing impaired 800-787-3224. Also recommend that she contact the HHS Employee Assistance Program where she can also get help in understanding and responding to the problem.
- ▶ Recommend that a workplace safety plan be developed in case an incident occurs at the workplace. Think about the safety of the individual as well as everyone around her. Don't be a hero if the perpetrator shows up at work. Follow the safety plan and go for help.

AFTER THE FACT

FIRST THINGS FIRST

No matter how effective HHS' policies and plans are in detecting and preventing incidents, there are no guarantees against workplace violence. Even the most responsive employers face this issue. After a violent or traumatic event has occurred, there are immediate procedures that must be put into place to address certain questions and needs. **Every work organization should have the procedures put in place BEFORE an incident occurs. Experts recommend that these procedures be tested through role-playing hypothetical cases with management and members of the Crisis Management Team.** Below is a list of such procedures. There may be additional ones based on the specific location of the event.

- ▶ Notify the chain of command in HHS, including the Crisis Management Team. Contact the Office of the General Counsel, the Employee

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Assistance Program and other Departmental units that can be of assistance (if not already on your local Crisis Management Team), if appropriate. The Crisis Management Team will immediately coordinate the debriefing process.

- ▶ When appropriate, notify local authorities, medical, fire, police.
- ▶ Determine the immediate safety of the workplace- do areas have to be secured, are there employees who need to be evacuated, etc.
- ▶ Find out what information is available on the incident- who are the witnesses, were pictures taken, what are the local authorities investigating and what is HHS' proper relationship with them.
- ▶ Determine if there are public relations concerns and, if so, contact public affairs for control of this information, reporters, etc.
- ▶ Determine if there are people to be notified who are external to the organization such as family members.
- ▶ Locate any equipment that needs to be utilized to handle the crisis such as computers to access employee records, cellular phones, first aid, etc.
- ▶ Show employees and customers that the Department cares about them.

HOW TRAUMAS AFFECT EMPLOYEES

While it is difficult to predict how an incident will affect a given employee, several factors influence the subjective intensity of trauma. These factors include the duration of the event, the amount of terror or horror the victim experienced, the sense of personal control (or lack thereof) the employee had during the incident, and the amount of injury or loss the victim experienced (i.e., loss of property, self-esteem, physical well-being, etc.). Other variables include an employee's previous victimization experiences, recent losses such as the death of a family member, and other intense stresses.

THE CRITICAL INCIDENT DEBRIEFING PROCESS

Providing crisis intervention and counseling assistance within the first 24 to 72 hours after a violent event is essential. Jeffrey Mitchell, from the University of Maryland, developed a protocol for gathering information and responding to the immediate emotional needs of employees who have been traumatized. It is called the Critical Incident Stress Debriefing (CISD) process. In HHS, this process will be coordinated by the Crisis Management Team. This counseling process is conducted by a professional with CISD training. The phases are described below.

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- ▶ introductory - normalize event; support
- ▶ fact phase - let people talk about what happened (heard, saw, etc.)
- ▶ thought phase - move from cognitive experience to emotional
- ▶ reaction phase - feeling/emotional state
- ▶ symptoms phase - determining the signals of life changes such as physical complaints and behavioral changes
- ▶ teaching phase - cognitive learning about symptoms; normalizing experiences and reactions
- ▶ reentry phase - plan of action; follow-up; referral to additional information sources and long-term counseling, if necessary

The phases last different periods of time for each person, particularly the later ones. An individual may get stuck at a certain phase depending on the factors discussed in the previous section.

CONSIDERATIONS FOR MANAGEMENT

Supervisors and managers play a critical role in responding to the immediate and long-term needs of employees. The following suggestions are provided for supervisory staff in handling employees after a violent event:

- ▶ Be sensitive to the "invisible" or emotional injuries described above.
- ▶ Observe the ripple effect of these events; the range of those impacted typically grows.
- ▶ Be sure the employee is not always isolated.
- ▶ Control media access to employees.
- ▶ Do not joke about the event.
- ▶ Do not trivialize the event - "It could have been worse".
- ▶ Suggest help through the EAP or other trauma interveners if symptoms and job performance changes do not normalize.

HELPING YOURSELF

There are a number of things employees can do to help themselves get through a traumatic event, particularly if a victim. In addition to availing themselves of help being offered by the Department, these ideas may help with the management of physical and emotional effects:

- ▶ Diet and exercise: eat balanced meals, keep stimulants to a minimum, do not use alcohol and drugs to cope, exercise regularly after the first 24

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- hours following the incident.
- ▶ Sleep: maintain a normal schedule, use relaxation techniques to help fall asleep.
- ▶ Talk: use social support systems, talk about the incident.
- ▶ Life-style: set realistic expectations, maintain a normal schedule, avoid boredom, don't fight flashbacks, take time to do enjoyable things.
- ▶ Get outside help when needed: seek medical assistance, plan for your safety, obtain counseling for trauma/stress, obtain referrals to community facilities.

PREVENTION

One of the major components of a workplace violence strategy is prevention. Below are some measures that can be taken to reduce or prevent these types of situations.

POLICY

Become familiar with HHS policies related to workplace violence. It is imperative that all employees, including managers and supervisors, understand this policy and modify behaviors that are prohibited. Customers and patients of HHS programs may also need to become familiar with these policies.

All managers and supervisors should discuss the policies and procedures with their staff members so that they understand how to handle intimidating, threatening, or violent incidents as well as understand the consequences of such behavior (such as disciplinary and/or adverse action up to and including removal and criminal charges).

WORK ENVIRONMENT

The best prevention strategy is to maintain an environment which minimizes negative feelings such as isolation, resentment and hostility among employees as well as provides for the safety and security of all employees. Although no workplace can be perceived as perfect by every employee, there are several steps that management can take to help create a professional, healthy, and caring climate. These include:

- ▶ promoting sincere, open communication among management and

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- employees;
- ▶ offering opportunities for advancement and professional development;
- ▶ fostering family activities and social opportunities open to all staff members;
- ▶ maintaining mechanisms for complaints and concerns and allowing them to be expressed in a non-judgmental forum that includes feedback to the initiator;
- ▶ taking threats seriously and taking appropriate and timely action;
- ▶ taking a sincere interest in "quality of life" issues such as facilities, job satisfaction and recreation opportunities; and
- ▶ maintaining fair treatment and discipline for all employees exhibiting improper conduct and performance.

EMPLOYMENT SCREENING

Another essential prevention measure is careful and thorough screening of pre-employment references to avoid hiring potentially dangerous individuals. Prior to hiring an employee, the supervisor/agency should check with its servicing personnel office to determine what employment screening techniques (such as interviewing questions, background and reference checks, and drug testing) are appropriate for the position under consideration and that are consistent with Federal laws and regulations. Pre-employment screening is a critical and sensitive part of workplace violence prevention and should receive due investigation and care in its implementation.

SECURITY

Maintaining a physically safe work place is part of any good prevention program. HHS facilities use a variety of security measures to help ensure safety. Compliance with these measures is critical and is what keeps employees safe. These measures include:

- ▶ the Federal Protective Service or a designated security officer to respond to emergencies;
- ▶ employee photo identification badges and individually coded card keys for access to buildings and areas within buildings according to individual needs;
- ▶ on-site guard services;
- ▶ guard force assistance in registering, badging and directing visitors in larger facilities;

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- ▶ other appropriate security measures; and
- ▶ security surveys to determine physical security posture of building(s).

Additional law enforcement assistance is available through local police departments for emergency situations. Employees should notify the appropriate security office or designated police of suspicious or unauthorized individuals on HHS property.

EDUCATION

Training and education are also critical components of any prevention strategy. The following types of training are effective in preventing violence and other threatening behavior and are recommended for employees of HHS: awareness programs for employees and supervisors, training for supervisors on effective job applicant screening, training on conflict resolution and stress management.

EARLY INTERVENTION

Intervening early in a threatening or potentially violent situation is vital to preventing its escalation. There are many intervention options, and they vary greatly depending upon the situation. Early intervention may diffuse the initial situation and give the supervisor an opportunity to more thoroughly review options for resolution.